



Canadian Centre for Accreditation
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CCA ACCREDITATION REVIEW FINAL REPORT FOR DE DWA DA DEHS NYE>S ABORIGINAL HEALTH CENTRE

Date of the Site Visit: October 31 to November 2, 2023
Date of the Report: February 8, 2024
Accreditation Term: February 25, 2024 to February 24, 2028

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SECTION 1: INTRODUCTION

A. INTRODUCTION TO ACCREDITATION WITH CCA

The Canadian Centre for Accreditation (CCA) is a national not-for-profit offering accreditation to community-based health and social service organizations in Canada.

Accreditation provides an external review of an organization's operations in relation to accepted standards of good practice and risk management. Standards address all aspects of the organization, including governance, management, programs and services. It is also a system to promote learning, improvement, excellence and innovation.

CCA looks at the whole organization. Reviews are conducted by CCA-trained teams made up of senior staff, governing body members and volunteers from the community-based organizations that participate in CCA.

B. ABOUT THIS REPORT

This report summarizes the findings of the CCA review process. The report includes the following:

- Section 1: Introduction
- Section 2: An overview of the accreditation process
- Section 3: A summary of accreditation review results
- Section 4: Concluding words

SECTION 2: OVERVIEW

A. THE ORGANIZATION

De dwa da dehs nye>s Aboriginal Health Centre believes itself to be the place of “first choice and last hope for Indigenous peoples” living within the communities they serve. They have been successfully providing culturally safe programs and services that are relationship based, welcoming and client directed for over twenty years. De dwa da dehs nye>s Aboriginal Health Centre is proud to be living its name of “taking care of each other amongst ourselves,”

De dwa da dehs nye>s Aboriginal Health Centre provides Primary Care and Health Promotions programs that are a blend of western and Indigenous traditional medicine in the urban centres of Brant/Brantford Region and the Greater Hamilton Area. The Brantford and Hamilton sites offer a full range of programs and services of Primary Care, Mental Health and Addictions, Cultural Wellness and Outreach and Healthy Living Programs. Niagara Region programming currently includes Cultural Wellness and Outreach and Mental Health Programs.

B. THE REVIEW TEAM

The review team was made up of:

- Anka Brozic, consultant, former CHC CEO
- Jocelyne Maxwell, Directrice Générale/ Executive Director, Centre de santé communautaire du Témiskaming
- David Willis, Executive Director, Keystone Child, Youth and Family Services
- Leigh-Anne Fraser, Accreditation Specialist, Canadian Centre for Accreditation

C. THE REVIEW PROCESS

A preliminary report was sent to the organization on November 16, 2023. The organization’s response was received on January 25, 2024 and reviewed by Leigh-Anne Fraser, CCA Accreditation Specialist.

D. THE ACCREDITATION DECISION

The Canadian Centre for Accreditation is pleased to inform you that your accreditation has been approved. All requirements for accreditation were assessed as met.

The organization’s accreditation term is February 25, 2024 to February 24, 2028.

E. SUMMARY OF ACCREDITATION REVIEW RESULTS

Results are summarized by module.

The following CCA modules apply to this review:

- CCA Organizational Standards
- Community-Based Primary Health Care Standards

SECTION 3: FINAL ACCREDITATION REVIEW RESULTS BY MODULE

A. ORGANIZATIONAL STANDARDS

Mandatory (MAN) Standards Required: 35

MAN Standards Achieved: 35

Leading Standards (LP) Standards Total: 24

LP Standards Achieved: 24

	MANDATORY STANDARDS						LEADING PRACTICE STANDARDS								
	Requirements		Results at Preliminary Stage		Results After Response Assessed		Requirements		Results at Preliminary Stage		Results After Response Assessed				
	M-Total	M-Must be met	M-Achieved	M-To be met for accreditation	M-Achieve	M-To be met for accreditation	LP-Total	LP-Must be met to achieve each Component	LP-Total # to be met to achieve Module	LP-Achieved	LP-To be met to achieve each Component	LP-To be met to achieve Module	LP-Achieved	LP-To be met to achieve each Component	LP-Total # to be met to achieve Module
By Component															
Organizational Foundations	4	4	3	1	4	—	2	1	—	2	0	—	2	—	—
Board Governance	3	3	3	0	3	—	3	2	—	3	0	—	3	—	—
Quality, Risk Management and Performance	5	5	1	4	5	—	2	1	—	2	0	—	2	—	—
Knowledge and Learning	3	3	1	2	3	—	3	2	—	3	0	—	3	—	—
Program and Service Approach	3	3	3	0	3	—	3	2	—	3	0	—	3	—	—
Indigenous-Informed Approach	1	1	1	0	1	—	2	1	—	2	0	—	2	—	—
Relationships with community	1	1	1	0	1	—	3	2	—	3	0	—	3	—	—
Stewardship and Financial Management	5	5	2	3	5	—	0	0	—	0	0	—	0	—	—
Human resources	5	5	3	2	5	—	4	2	—	4	0	—	4	—	—
Volunteers and Students	2	2	2	0	2	—	1	1	—	0	1	—	1	—	—
Information Management	3	3	0	3	3	—	1	1	—	0	1	—	1	—	—
Totals for Module	35	35	20	15	35	—	24	—	20	23	—	0	24	—	—

Detailed Results for the CCA Organizational Standards Module

i. Strengths in this Module

Indigenous Informed Approach: The review team was grateful for the warm welcome they received upon arriving at De dwa da dehs nye>s Aboriginal Health Centre. They heard from staff during the interviews about the thoughtful, respectful and intentional engagement of community members of many nations who come to De dwa da dehs nye>s Aboriginal Health Centre for care. It was clear to the review team that the organization is proud to be living its name of “taking care of each other amongst ourselves.” The organization successfully aligns the work done by staff every day at their locations with the organization’s vision of “vibrant, healthy Indigenous communities” and their mission of “improving the health and well-being of Indigenous individuals, families and communities through holistic Indigenous, Traditional and Western health care.”

Organizational Foundations: The review team found that the mission, vision and values of the organization are demonstrated through service delivery, a consistent client-centred approach throughout, and the Board’s support and leadership. The De dwa da dehs nye>s Aboriginal Health Centre’s mission, vision, values, strategic priorities and approach to service reflect an explicit commitment to meeting the unique and diverse needs of the communities served. The organization’s inclusion of all nations into their circles of care amplify and reflect the care and compassion shown by staff every day.

Board Governance: The review team were impressed by the Board of Directors and their thoughtful and engaged approach to their role as leaders within De dwa da dehs nye>s Aboriginal Health Centre. The board clearly functions in alignment with its governance model, bylaws, policies and procedures. Their inclusiveness and respect of each Board Director and their employee (COO/CEO) is also an area of strength identified by the review team.

Knowledge and Learning: The review team heard from staff, and found in the evidence provided, many examples of how evidence-informed practice information and data are used to guide staff and inform the development, delivery and continuous improvement of programs and services. The review team was impressed by the intentional, planned and ethical approach the organization takes to participating in any research study it is involved in.

Program and Service Approach: The review team was impressed by De dwa da dehs nye>s Aboriginal Health Centre’s approach to service with a focus on the persons and communities served. The review team heard from staff and found in the evidence provided that the organization’s person-centred approach is supported by clear client rights and responsibilities, and that staff work to ensure that programs and services are accessible to everyone.

ii. Further Areas to Improve Quality in this Module

The organization is commended for its achievement of all Leading Practice Standards and indicators in this module.

The CCA review team offers the following comments by way of encouraging De dwa da dehs nye>s Aboriginal Health Centre in its continued growth and pursuit of quality.

Standard ORG-QUA 3.0: *The organization takes an integrated, organization-wide approach to assuring quality.*

Indicator ORG-QUA-3.4: *Learnings from monitoring performance and from quality improvement initiatives are used to make improvements in services or operations.*

- CCA encourages the organization to continue to develop their integrated approach to assuring quality in all of their programs and services at each location. The collection and analysis of data drawn from monitoring and evaluating initiatives can continue to be used to make improvements in the services offered by the organization.

Standard ORG-PSA 5.0: *The organization works to provide timely access to programs and services.*

Indicator ORG-PSA-5.4: *Information on wait times is used to measure performance against targets and work to make improvements.*

- CCA encourages the organization to continue to develop innovative solutions to wait times for programs and services and use the information gathered to help make improvements, assess targets and measure performance for quality improvement purposes.

Standard ORG-COM 2.0: *The organization's communications are guided by a strategy and policies.*

Indicator ORG-COM-2.5: *The effectiveness of communications strategies is reviewed at a minimum annually and the results are used to make improvements.*

- CCA encourages the organization to continue to develop communication strategies that are reviewed annually.

Indicator ORG-COM-4.3: *The effectiveness of public education work is routinely assessed.*

- CCA encourages the organization to monitor and evaluate the effectiveness of their public education activities and events in order to make improvements and use the information to help identify new areas of program development.

No immediate action is required for accreditation in the section: "Further Areas to Improve Quality".

B. COMMUNITY-BASED PRIMARY HEALTH CARE STANDARDS MODULE

Mandatory (MAN) Standards Required: 12
 MAN Standards Achieved: 12

Leading Standards (LP) Standards Total: 3
 LP Standards Achieved: 3

	MANDATORY STANDARDS						LEADING PRACTICE STANDARDS								
	Requirements		Results at Preliminary Stage		Results After Response Assessed		Requirements		Results at Preliminary Stage		Results After Response Assessed				
	M-Total	M-Must be met	M-Achieved	M-To be met for accreditation	M-Achieve	M-To be met for accreditation	LP-Total	LP-Must be met to achieve each Component	LP-Total # to be met. to achieve Module	LP-Achieved	LP-To be met to achieve each Component	LP-To be met to achieve Module	LP-Achieved	LP-To be met to achieve each Component	LP-Total # to be met. to achieve Module
By Component															
Community-Based Approach	2	2	2	0	2	—	2	1	—	2	0	—	2	—	—
Delivery of Quality Programs and Services	6	6	6	0	6	—	1	1	—	1	0	—	1	—	—
Service Safety	4	4	3	1	4	—	0	0	—	0	0	—	0	—	—
Totals for Module	12	12	11	1	12	—	3	—	3	3	—	0	3	—	—

Detailed Results for the Community-Based Primary Health Care Standards Module

i. Strengths in this Module

Community-Based Approach: The review team found through the evidence provided and heard during the onsite interviews that the organization's services are grounded in the social determinants of health based on a holistic approach, within a culturally safe environment. The review team found that the organization has implemented services and programs that reduce inequities by blending traditional medicine with western medicine, having a mobile clinic and incorporating Indigenous Patient Navigator roles. The organization brings different specialists on-site and has developed programs such as the diabetes program and the well-being program. It also provides transportation services and food gift cards to those in need of that kind of assistance.

De dwa da dehs nye>s Aboriginal Health Centre participates in different initiatives to gather data to gain better understanding of health inequities in the communities that they serve across the region and uses the data to inform services that work to close gaps related to social determinants of health for the Indigenous populations. In primary care, the organization addresses inequities by providing flexible appointments, essential supplies and same-day urgent appointments, as well as virtual and phone appointments for those who encounter transportation barriers.

The review team heard about the multitude of partners the organization manages and supports including physiotherapy, the pain clinic and the Fetal Alcohol Spectrum Disorder (FASD) assessment and diagnostic clinic. The organization participates in research projects such as the Mending Broken Hearts Project, through which staff are creating resources for both Indigenous women and health care providers throughout the system. The review organization heard from staff about the advocacy and outreach work the organization has become a partner of choice.

Delivery of Quality Programs and Services: The review team also heard about other ways in which the organization has adapted certain services, such as doing blood work on site after having identified that many individuals from the community would not access this service in any other way. De dwa da dehs nye>s Aboriginal Health Centre's willingness to recognize individual choice and needs, as well as integrate traditional and western medicine, made it clear to the review team that cultural safety is key in all the work done by the organization.

The review team heard from staff and read in the evidence provided that De dwa da dehs nye>s Aboriginal Health Centre's commitment to ensuring cultural safety in their delivery of programs and services is paramount. The review team could see this is also done at the system level through advocacy. The organization's outreach programs and their efforts in raising awareness to better support the community and improve health and wellbeing of patients were also strong examples of this dedication to delivering quality programs and services. Throughout the interviews, the review team heard from staff about the person-centred and holistic approach used to focus on individuals' strengths within a culturally safe environment. The review team spoke with clients who said that they were full participants in their care plan and clearly understood all aspects of the service journey.

The review team also identified De dwa da dehs nye>s Aboriginal Health Centre's inter-professional team approach as a strength of the organization. The review team heard from staff about the ongoing communication and collaboration that occurs formally through PS

Suite, monthly full primary care meetings and site meetings. The review team also heard during the interviews that this is also done informally on a continuous basis. The review team was impressed to hear about how staff do not hesitate to call upon colleagues if they are unsure of something and how responses holistic. Staff are engaged in ongoing assessments and improvements of interprofessional practice through staff meetings, cases conferences, professional development, appraisals and supervision. The review team heard about the strong mechanisms in place for continuity, coordination and effective handoffs with external providers. The review team was impressed by the strong commitment to person-centred holistic care and cultural safety.

Service Safety: The review team heard from staff and read in the evidence provided how De dwa da dehs nye>s Aboriginal Health Centre is committed to the health and wellbeing of the community. Staff provided many examples of how the organization participates in community-wide, population-based illness and injury prevention. The review team also heard about the work the organization did in partnership with Public Health Units related to COVID vaccinations.

SECTION 4: CONCLUSION

The CCA review team appreciates the work undertaken by De dwa da dehs nye>s Aboriginal Health Centre to prepare for its review and thanks them for the warm welcome they received while on site. In particular, the organization's accreditation team was very knowledgeable and well prepared.

CCA commends the organization's commitment to quality and continuous improvement and encourages De dwa da dehs nye>s Aboriginal Health Centre to address the areas for further improvement.

Congratulations on achieving your accreditation. CCA is very pleased with your performance in achieving 47 out of 47 Mandatory Standards and 27 out of 27 Leading Practice Standards included in the Organizational and the Community-Based Primary Health Care modules.

CCA is pleased to accredit De dwa da dehs nye>s Aboriginal Health Centre for a four-year term.